

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	F.F.		05-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		1019	5-21-01
FORMALITY REVIEW	K	925/876	06-22-01
RESPONSE FORMALITY REVIEW	T.G./T.V.	866	11/07/01
Response	H.S.		01-16-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral) ..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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6/20/01  
 5c 876  
 11/07/01  
 947  
 01/16/02